Applica	tion or	Docket	Numbe

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

				Ci 20, 1000			•			
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMA TYP	LL ENTITY	OR	OTHER SMALL		
FC	PR	NUMBE	R FILED	NUMBER I	EXTRA	RAT	E FEE	1	RATE	FEE
BASIC FEE					345.00	OR		690.00		
TOTAL CLAIMS /3 minus 20= *					X\$ 9)=	OR	X\$18=		
INDEPENDENT CLAIMS 2 minus 3 = *					X39	= .	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT					+130)=	OR			
* If th difference in column 1 is less than zero, enter "0" in column 2					TOTA		OR		190	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMA	LL ENTITY	OR	OTHER SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAI FEE
AMENDMENT	Total	. 13	Minus	20	=	X\$ 9	=	OR	X\$18=	
AME	Independent	. 2	Minus	···3	=	X39	= .	OR	X78=	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT CLAIM		+130	=	OR	+260=	
	•					TO ADDIT. F		OR	TOTAL ADDIT FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDITE	· .		7,0011.1 EE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONA FEE
NDM	Total	. 27	Minus	- 20	= 7	X\$ 9	=	OR	X\$18=	122.0
AMENDMENT	Independent	· 6	Minus	*** 3	= 3	X39:	=	OR	X78=	234.
	FIRST PRESE	NIATION OF M	ULTIPLE DEF	PENDENT CLAIM		+130	=	OR	+260=	
						TO ADDIT. F		OR	TOTAL ADDIT. FEE	360
(Column 1) (Column 2) (Column 3)										
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
AMENDMENT	Total	. 57	Minus	·· 27	= 30	X\$ 9		OR	X\$18=	540.0
AME	Independent	. 7	Minus	··· 6	= /	X39=		OR	X78=	78.0
•	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM		+130	=	OR	+260=	7 0.0
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE							TOTAL ADDIT. FEE			

FORM PTO-875 (Rev. 12/99)